

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33530
Name: Reif Oil & Gas Co., LLC
Address: 250 S. Center po box 298
City/State/Zip: Hoisington, KS 67544
Purchaser: Seni Crude
Operator Contact Person: Donald J. Reif
Phone: (620) 653-2976
Contractor: Name: Warren Drilling
License: 33724
Wellsite Geologist: Jim Muskgrove

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHH SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

6-30-06 7-10-06 7-31-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 009-24948-0000

County: Barton

NE NW NW Sec. 16 Twp. 17 S. R. 14 East West

330 feet from S / (circle one) Line of Section

1120 feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE (NW) SW

Lease Name: Elwyn Well #: 1

Field Name: Carrol

Producing Formation: Arbuckle

Elevation: Ground: 1964 Kelly Bushing: 1971

Total Depth: 3481 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 433 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ ^{sq cmt.}

Alt-1-Dg-12/2008

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Donald J. Reif

Title: Pres Date: 10-1-06

Subscribed and sworn to before me this 1st day of October

Notary Public: Eudora Reif

Date Commission Expires: _____

EUDORA REIF
Notary Public - State of Kansas
My Appt. Expires 12-23-2008

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED

NOV 14 2006

KCC WICHITA

Operator Name: Reif Oil & Gas Co., LLC Lease Name: Elwyn Well #: 1
 Sec. 16 Twp. 17 (S) R. 14 East West County: Barton

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebner	3042 1071
Electric Log Run <i>(Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Lansing	3222 1251
List All E. Logs Run:		B.K.C.	3432 1461
		Arbuckle	3475 1504
		TD	3481 1510

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacs Used	Type and Percent Additives
Long String		5 1/2 "	14	3478	60-40Poz	125	A17-2+Gelflake

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input checked="" type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	<u>Oil</u> 45 Bbls.	Gas Mcf	<u>Water</u> 5 Bbls.	Gas-Oil Ratio Gravity 40

Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	METHOD OF COMPLETION <input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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Customer: Reif Oil & Gas Lease No. Date: 6-10-06
 Lease: Elwyn Well # 1
 Field Order #: 13370 Station: Pratt Casing: 5 1/2" Depth: 3478' County: Barton State: KS
 Type Job: Longstring W.W. Formation Legal Description: 16-175-14w

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 5 1/2"	Tubing Size	Shots/Ft 136	15.3	Acid 125 sk. AA-2 5#	10% Salt	RATE 2000	PRESS 2000	ISIP
Depth 3466	Depth P1570	From	To	Pre Pad 125 C.F. 3 F.R. 8	CA			5 Min.
Volume 84.5	Volume	From	To	Pad 173 G.B. 25 D.F.	Min			10 Min.
Max Press 2000	Max Press	From	To	Frac 25 sk. 60-40 pot	Avg			15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush 500 gal. M.F.	Gas Volume			Total Load

Customer Representative: Don Reif Station Manager: D. Scott Treater: Scotty

Service Units: 107 226 305 572

Driver Names: Scott Andrews Vonfeldt

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1400					On Loc w/ Trks Safety mtg G.S. Bottom ISFV Top S.J. Cent 1-3-5-7-9 Csg on Bottom Drop Balls Circ w/Rig Tag + Circ Bottom pickup 2ft
1750	200		10	4	H2O Spacer
1753	200		12	4	St mud Flush
1756	200		5	4	H2O Spacer
1758	200		30.2	4.3	mix Cmt @ 15.3 ppg 125 sks
1603	0		10	4	Close In + Wash Pump + line
1605	100			6	Release Plug + St Disp w/H2O
1616	275		65	5	65 Bbls Disp out lift Cmt
1625	1000		84.5	0	Plug Down + psi Test Csg Release psi float Held Plug R.H. w/ 15 sks 60-40 pot Good Circ Thru Job
					Job Complete Thank you Scotty

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 KANSAS CORPORATION COMMISSION
 JAN 18 2008
 INSPECTION DIVISION
 TOPEKA, KS



14.90 Shoe Jone

FIELD ORDER 13370

Subject to Correction

Date 7-10-06		Customer ID		Lease Elywn	Well # #/	Legal 16-17s-14
CHARGE Reif Oil & Gas		Depth	Formation TP=3481	County Barton	State KS	Station Pratt
		Casing 5 1/2	Casing Depth 3478	TD 3481		Shoe Joint 14.90
		Customer Representative Don Reif			Treater D. Scott	
Job Type Longstring D.W.						

AFE Number	PO Number	Materials Received by X <i>[Signature]</i>
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Station Code	Product Code	QUANTITY	MATERIALS, EQUIPMENT, and SERVICES USED	UNIT PRICE	AMOUNT
P	D205	125 sks	AA-2		
P	D203	25 sks	60-40 po2		
P	C243	30 lbs	Defoamer		
P	C194	32 lbs	Cellflake		
P	C195	95 lbs	FLA-322		
P	C244	36 lbs	Friction Reducer		
P	C221	589 lbs	Salt Fine		
P	C321	626 lbs	Gilsonite		
P	C312	89 lbs	Gas Blok		
P	C302	500 gals	Mud Flush		
P	F101	5 ea	Centralizers		
P	F143	1 ea	Top Swiper Plug		
P	F231	1 ea	ISFV w/Fill		
P	F191	1 ea	Guide Shoe		
P	E100	2 ea	Trk mi /way 80 mi		
P	E101	1 ea	Pickup mi /way 80 mi		
P	E104	560+m	Bulk Delv Charge		
P	E107	150 sks	Cmt Serv Charge		
P	R207	1 ea	Pump Charge		
P	R701	1 ea	Cmt Head Rental		

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JAN 18 2008
CONSERVATION DIVISION
WICHITA, KS

Discounted Price =